

2004 LIMITED PARTNERSHIP ANNUAL REPORT
Due By May 1, 2004

FILED
Mar 29, 2004 08:00 AM
Secretary of State

DOCUMENT # B93000000063

1. Entity Name
ERMC, L.P. (LIMITED)



Principal Place of Business
**1200 SOUTH PINE ISLAND RD.
 PLANTATION, FL 33324**

Mailing Address
**6148 LEE HWY., STE. 300
 CHATTANOOGA, TN 37421**

2. Principal Place of Business

3. Mailing Address



01052004 Chg-LP CR2E003 (10/03)

Suite, Apt. #, etc.

Suite, Apt. #, etc.

4. FEI Number
62-1508099

Applied For
 Not Applicable

City & State

City & State

5. Certificate of Status Desired ☐ **\$8.75** Additional Fee Required

Zip

Country

Zip

Country

6. Name and Address of Current Registered Agent

**C T CORPORATION SYSTEM
 1200 SOUTH PINE ISLAND RD.
 PLANTATION, FL 33324**

7. Name and Address of New Registered Agent

Name

Street Address (P.O. Box Number is Not Acceptable)

City

FL

Zip Code

8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable.

DATE

9. Capital Contributions as Shown on record. **\$99.00**

10. Amount of Capital Contributions in FLORIDA to date.

41,25

A GENERAL PARTNER THAT IS A BUSINESS ENTITY MUST BE REGISTERED AND ACTIVE WITH THIS OFFICE.
NOTE: General Partners MAY NOT be changed on the form; an amendment must be filed to change a general partner.

12. GENERAL PARTNER INFORMATION

13. ADDRESS CHANGES ONLY

DOCUMENT # **F93000000831**
 NAME **RUSSELL SECURITY CO., INC.**
 STREET ADDRESS **6148 LEE HWY., STE. 300**
 CITY-ST-ZIP **CHATTANOOGA, TN 37421**

STREET ADDRESS

CITY-ST-ZIP

1000001104346
04/06/04-90006-005 141 25

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STREET ADDRESS

CITY-ST-ZIP

14. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report is true and accurate and that my signature shall have the same legal effect as if made under oath, that I am a General Partner of the limited partnership or the receiver or trustee empowered to execute this report as required by Chapter 620, Florida Statutes

SIGNATURE:

Emerson E. Russell **Emerson E. Russell**

3/26/04

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING GENERAL PARTNER

Date

Daytime Phone #

STAPLE CHECK HERE